

CLAIMS ONLY							Application Number 1015916886	Filing Date
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51	
2							52	
3							53	
4							54	
5							55	
6	1						56	
7							57	
8							58	
9							59	
10	1						60	
11	1						61	
12							62	
13							63	
14							64	
15							65	
16							66	
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39							89	
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41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	3						Total Indep	
Total Depend	8						Total Depend	
Total Claims							Total Claims	